



INTRAOSSEOUS INFUSION (IO)

FIELD ASSESSMENT/TREATMENT INDICATORS

1. Primary vascular access in cardiac arrest patients eight (8) years of age and younger.
2. Any patient where venous access is unavailable by any other means.

CONTRAINDICATIONS

1. Fracture of target bone.
2. Previous IO attempt and marrow entry at target site.

PROCEDURE

1. Select and prep the following preferred sites for appropriate patient age.
 - a. Eight (8) years of age and younger - Anterior medial surface of tibia, 2cm below tibial tuberosity.
 - b. Nine (9) years of age and older –
 - i. Lower end of tibia, 2cm above the medial malleolus
 - ii. Proximal humerus.
 - c. Base Station contact - Anterior distal femur, 2cm above the patella.
2. Confirmation of placement is verified by the following:
 - a. Needle stands upright without support.
 - b. Aspiration of blood/marrow.
 - c. Ability to infuse IV solution without s/s of extravasation.
 - d. Leave site visible.

3. To control infusion pain on a conscious patient, use 2% Lidocaine.
 - Prime the extension tubing with 0.5mg/kg of 2% Lidocaine and infuse *slowly* (over 30 to 60 seconds), not to exceed 50mg total. Allow one (1) minute for anesthetic effect before infusing fluids.
4. Infusion may need to be pressurized using syringe or pressure bag device.
5. Monitor site closely when administering dopamine for signs of extravasation

DOCUMENTATION

In the event the receiving physician discovers the device is improperly placed, an Incident Report must be completed by the receiving hospital and forwarded to ICEMA within twenty-four (24) hours of the incident. Forms are available as part of the protocol manual and on the ICEMA website.